FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information	ā														
 Name and Mailing Address of Respondent 	Respondent														
Raicom, Inc. PO Box 645 Benkelman, NE 69021	1												Che is a	Check here if this is a change of address.	
 Year Report Filed 2017 		3. Reporting Period Co	Reporting Period (Ending Deriod Covered by Report) March 31 2017	Reporting Period (Ending Date of Pay Period Covered by Report) March 31 2017	зу		4. Number of Reporting a. Fe	4. Number of Full-Time Employees during Selected Reporting Period (check one): a. Fewer than 16 (complete Sections I, IV, and V only)	mployees du k one): complete Sec	ring Selected	d V only)				
SECTION II - Full-Time Employees.	es.						p. L. 16	16 or more (complete all sections)	plete all sect	ions)					
							Num (Report empl	Number of Employees (Report employees in only one category)	yees one category						
Job								Race/Ethnicity	,						
Categories	Hisp	Hispanic or						Not-Hispanic or Latino	ic or Latino						Total
					Male	le					Female	nale			Columns A - N
	Male	Female	White	Black or African American	Native Hawaiian or Other	Asian	American Indian or Alaska	Two or more races	White	Black or African American	Native Hawaiian or Other	Asian	American Indian or Alaska	Two or more races	
					Islander		Native				Islander		Native		
Executive/Senior Level 1.1)	a	c	-	п	7	G	ı	-	٠	~	F	3	z	0
First/Mid-Level Officials and 1.2															0
Professionals 2															0
Technicians 3															0
Sales Workers 4															0
Administrative Support 5 Workers															0
Craft Workers 6															0
Operatives 7										9.00					0
Laborers and Helpers 8															0
Service Workers 9															0
TOTAL 10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PREVIOUS YEAR TOTAL 11															0

Title of Person Signing General Manager	04/01/2017 Typ	SECTION V - Certification I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.	This is to advise the C (Attach a list indicating	This is to advise the C company before any t	SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.	PREVIOUS YEAR TOTAL 11	TOTAL 10	Service Workers 9	Laborers and Helpers 8	Operatives 7	Craft Workers 6	Administrative Support 5 Workers	Sales Workers 4	Technicians 3	Professionals 2	First/Mid-Level Officials and 1.2	Executive/Senior Level Officials and Managers 1.1				Categories	Job	
	yped or Printed Name of Randall J Raile	/ledge, infor	commission g parties inv	commission body having	nation Com		0				- 67	- Gi	-		10	-2		Þ	Male				
	Typed or Printed Name of Person Signing Randall J Raile	nation, and be	that the followi olved, date file	that no compla competent juri	plaints Pursu		0											В	Female		Hispanic or		
	son Signing	lief, all statem	ng complaints d, courts or a	ints regarding	ant to 47 CF		0											c	White				
OF ANY ST	Signature	ents in this re	s alleging viola gencies before	y violations of ch matters dur	R 22.321, 23.		0											D	Black or African American				
FALSE STAT		port are true a	itions of the pr	the equal emp	55, 90.168, 10		0											Е	Native Hawaiian or Other Pacific Islander	~			
EMENTS MA		ind correct.	ovisions of ar atter has beer	This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company (Affact a late) indication parties involved data filed courte concepts before which the parties have been filed against this company.	1.4, and 101.		0											F	Asian	Male			
WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	andree		ny equal emplo n heard, file no		311.		0											9	American Indian or Alaska Native				Num (Report empl
	el Joseph, os		yment oppor	ral, state, tem ort.			0											н	Two or more races		Not-Hispar	Race/Ethnicity	Number of Employees (Report employees in only one category)
			unity statute I	itorial, or local			0											-	White		Not-Hispanic or Latino	Y	one category
			Company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.	statutes have			0											٦	Black or African American				
	7			been filed against this against this			0											7	Native Hawaiian or Other Pacific Islander	Fer			
	Telephone No. (308) 423-2000						0											۲	Asian	Female			
							0											Z	American Indian or Alaska Native				
							0											z	Two or more races				
VOCATION						0	0	0	0	0	0	0	0	0	0	0	0	0		Columns A - N	Total		